

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/031,289
				Filing Date	July 13, 2000
				First Named Inventor	Vega MASIGNANI
				Art Unit	1645
				Examiner Name	S. Devi
Sheet	1	of	1	Attorney Docket Number	223002100200

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
/S.D./	1.	US-7,029,845-B2	04-18-2006	Nassif et al.	435/6

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
/S.D./	2.	WO-98/02547-A2	01-22-1998	Institut National De La Sante Et De La Recherche Medicale		

Examiner Signature		Date Considered	
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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
/S.D./			

Examiner Signature	/S. Devi/	Date Considered	05/16/2008
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